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CONFIRMATION NO. 6959

Bib Data Sheet

SERIAL NUMBER 10/645,071	FILING DATE 08/21/2003  RULE	CLASS  379	GROUP ART UNIT 2645	ATT DOC CO:
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *No ch* \*\*\*\*\*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *No d* \*\*\*\*\*IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED

\*\* 11/14/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR  COUNTRY CO	SHEETS  DRAWING 4	TOTAL CLAIMS 30	INDE (
Examiner's Signature	Initials				

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